THE PLANNING AND ORGANIZATION OF CENTRAL SYRINGE SERVICES. (Pp. 59. 3s. 6d.) London: Nuffield Provincial Hospitals Trust, 1957.

The sterilization of syringes by boiling is acknowledged to be uncertain and unsatisfactory, but it is still common practice in most hospitals. During the last few years an increasing number of hospitals have developed a central sterile syringe service. Most of the teething troubles have now been overcome and the publication of this admirable booklet by the Nuffield Provincial Hospitals Trust is opportune. The authors have studied carefully syringe services in three hospitals of different sizes, and the results of their investigations set out in the booklet render it an essential vademecum for any hospital contemplating the establishment of a syringe service.

The first chapter deals with accommodation, staff and equipment, including in the latter recommendations on methods of sterilization, by autoclave, hot-air oven, and infra-red heat. The standard method is the hot-air oven, fitted with a fan, and autoclaving is not approved for the sterilization of syringes. The choice of syringes is discussed and figures are given for the relative cost of replacements. Equipment for washing, handling and packaging of syringes and needles are all reviewed in detail.

In the second chapter procedures and techniques are described for the use, care, and sterilization of syringes, including ward procedure, processing of syringes, cleaning and sampling of needles, arrangement of the assembly bench, storage and issue, and the keeping of records. No detail of procedure is omitted from this chapter and many new ideas are incorporated, including the ultrasonic method of cleaning needles, the use of aluminium foil capsules for sealing syringe containers, and pirn-boards for holding syringe barrels.

The third chapter is devoted to capital cost of equipment and running costs, according to the daily turnover of syringes and the scope of the service to be given. For a service providing about 500 syringes a day, the capital outlay would be about £2,000, and the running costs, including syringe and needle replacements, £3,725 a year, or about 5d. a syringe.

Two appendices give particulars of items of equipment, the sources from which they may be obtained, and advice on procedures aimed at decreasing syringe breakage.

This booklet will be of great help to hospitals considering the development of a central syringe service, providing increased safety, economy, and saving of nurses' time. A further step would be to incorporate the central syringe service in a central sterile supply department, providing not only syringes and lumbar puncture needles, but also sterile packs, dressing-trays, and sterile solutions to wards, out-patient departments and operating theatres. v.p. A.

THE EARLY DIAGNOSIS OF THE ACUTE ABDOMEN. By Sir Zachary Cope, B.A., M.D., M.S.(Lond.), F.R.C.S.(Eng.). Eleventh Edition. (Pp. x + 188; figs. 35. 18s.) London: Oxford University Press, 1957.

This little book, now in its eleventh edition, needs no introduction to the medical profession: it has for long been a firm favourite. The entire contents have been revised and new sections written on acute abdominal symptoms due to vascular disease and on neonatal intestinal obstruction.

It is apparent that the older and more fundamental parts of the book were written with a missionary zeal at a time when the author was often called to see cases at a hopelessly late hour when the patients had already developed generalised peritonitis. Previous editions have no doubt helped to bring many patients to the surgeon at a much earlier stage, and this new volume will carry on the good work. The early chapters were clearly compiled from a vast surgical experience and have a ring of authenticity which the newer sections lack. It would appear that the newer abdominal lesions have been added for the sake of completeness, but yet, in themselves, do not appear complete.

The new edition is, as always, written in clear, concise English, and the author is to be congratulated on keeping the text down to a mere 188 pages. This is a volume which can be read and reread with benefit. In no part of surgery is early diagnosis so important as in the acute abdomen.

J. w. s. 1.